

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	180	70031	
O.I.P.E. CLASSIFIER	180	70031	
FORMALITY REVIEW		70017	11/17/03
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/10/02
2	✓	✓	11/23/02
3	✓	✓	11/16/02
4	✓	✓	11/04/02
5	✓	✓	
6	✓	=	
7	✓	=	
8	✓	✓	
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If more than 150 claims or 10 actions  
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